

B1 (Official Form 1)(1/08)

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Ohm, Paul J		Name of Joint Debtor (Spouse) (Last, First, Middle): Ohm, Frances C
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-4548		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-5847
Street Address of Debtor (No. and Street, City, and State): 1615 Lincoln Street North Chicago, IL <div style="text-align: right;">ZIP Code 60064</div>		Street Address of Joint Debtor (No. and Street, City, and State): 1615 Lincoln Street North Chicago, IL <div style="text-align: right;">ZIP Code 60064</div>
County of Residence or of the Principal Place of Business: Lake		County of Residence or of the Principal Place of Business: Lake
Mailing Address of Debtor (if different from street address): P.O. Box 306 North Chicago, IL <div style="text-align: right;">ZIP Code 60064</div>		Mailing Address of Joint Debtor (if different from street address): P.O. Box 306 North Chicago, IL <div style="text-align: right;">ZIP Code 60064</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Ohm, Paul J
Ohm, Frances C

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Paul J Ohm
Signature of Debtor Paul J Ohm

X /s/ Frances C Ohm
Signature of Joint Debtor Frances C Ohm

Telephone Number (If not represented by attorney)

January 29, 2009
Date

Signature of Attorney*

X /s/ Michelle Hinds
Signature of Attorney for Debtor(s)

Michelle Hinds 6295092
Printed Name of Attorney for Debtor(s)

Legal Helpers, PC
Firm Name
Sears Tower
233 S. Wacker Suite 5150
Chicago, IL 60606

Address

(312) 467-0004 Fax: (312) 467-1832

Telephone Number

January 29, 2009

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X _____

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D(Official Form 1, Exhibit D) (12/08)

**United States Bankruptcy Court
Northern District of Illinois**

In re Paul J Ohm
Frances C Ohm

Debtor(s)

Case No.
Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Paul J Ohm
Paul J Ohm

Date: January 29, 2009

B 1D(Official Form 1, Exhibit D) (12/08)

**United States Bankruptcy Court
Northern District of Illinois**

In re Paul J Ohm
Frances C Ohm

Debtor(s)

Case No.
Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Frances C Ohm
Frances C Ohm

Date: January 29, 2009

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court
Northern District of Illinois

In re Paul J Ohm,
Frances C Ohm

Debtors

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	73,102.92		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		78,247.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	29		279,040.49	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			1,553.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			1,550.00
Total Number of Sheets of ALL Schedules		41			
Total Assets			73,102.92		
Total Liabilities				357,287.49	

United States Bankruptcy Court
Northern District of Illinois

In re Paul J Ohm, Case No. _____
Frances C Ohm
Debtors Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	1,553.00
Average Expenses (from Schedule J, Line 18)	1,550.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	65.02

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		6,632.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		279,040.49
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		285,672.49

B6A (Official Form 6A) (12/07)

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
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None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account with Northstar Bank	-	91.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Miscellaneous used household goods	-	750.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Personal used clothing	-	300.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Life Insurance Policy through Variable Universal Life Cash Surrender Value of \$346.92	-	346.92
10. Annuities. Itemize and name each issuer.	X			

Sub-Total > 1,487.92
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

Sub-Total > 0.00
(Total of this page)

Sheet 1 of 3 continuation sheets attached
to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Joint Debtor has hired an attorney for a Worker's Compensation claim. No lawsuit has been filed at this time, but a claim has been filed. Joint debtor receives money for medical bills, as well as \$106/week. Attorney for Joint Debtor is Douglas Rallo, P.C. His contact information is: 611 South Milwaukee Ave. Libertyville, IL 60048 1-847-816-8780	J	Unknown
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1988 Chevrolet P30, 125,000 miles Value Based on Kelley Blue Book	-	1,615.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			

Sub-Total > 1,615.00
(Total of this page)

Sheet 2 of 3 continuation sheets attached
to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		Real Estate located at 1019 Pine, Waukegon, IL Joint Debtor is not on the deed of this real estate. She is a cosigner on the second mortgage.	J	70,000.00

Sub-Total > 70,000.00
(Total of this page)
Total > 73,102.92

Sheet 3 of 3 continuation sheets attached
to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (12/07)

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

- ☐ 11 U.S.C. §522(b)(2)
☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u>			
Checking account with Northstar Bank	735 ILCS 5/12-1001(b)	91.00	91.00
<u>Household Goods and Furnishings</u>			
Miscellaneous used household goods	735 ILCS 5/12-1001(b)	750.00	750.00
<u>Wearing Apparel</u>			
Personal used clothing	735 ILCS 5/12-1001(a)	300.00	300.00
<u>Interests in Insurance Policies</u>			
Life Insurance Policy through Variable Universal Life	735 ILCS 5/12-1001(b)	346.92	346.92
Cash Surrender Value of \$346.92			
<u>Other Contingent and Unliquidated Claims of Every Nature</u>			
Joint Debtor has hired an attorney for a Worker's Compensation claim. No lawsuit has been filed at this time, but a claim has been filed. Joint debtor receives money for medical bills, as well as \$106/week.	820 ILCS 305/21	100%	Unknown
Attorney for Joint Debtor is Douglas Rallo, P.C. His contact information is: 611 South Milwaukee Ave. Libertyville, IL 60048 1-847-816-8780			
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u>			
1988 Chevrolet P30, 125,000 miles Value Based on Kelley Blue Book	735 ILCS 5/12-1001(c)	2,400.00	1,615.00

Total: 3,887.92 3,102.92

0 continuation sheets attached to Schedule of Property Claimed as Exempt

Debtors

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xx3582 A/r Concepts 2320 Dean St Suite 202 Saint Charles, IL 60175	H	Opened 7/01/06 Last Active 9/01/06 Med1 Lake Shore Pathologists S C				46.00
Account No. xx2261 A/r Concepts 2320 Dean St Suite 202 Saint Charles, IL 60175	H	Opened 6/01/06 Last Active 8/01/06 Med1 Lake Shore Pathologists S C				37.00
Account No. xxx-xx-5847 A/R Resources PO Box 10336 Jacksonville, FL 32247	J	2008 Collections for Vista				0.00
Account No. xxx-xx-4548 A/R Resources, Inc. PO Box 10336 Jacksonville, FL 32247	J	2005 Colections				1,408.60
Subtotal (Total of this page)						1,491.60

28 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx7205 Ais Services 50 California St Suite 1500 San Francisco, CA 94111	W	Opened 5/01/07 Last Active 8/01/07 FactoringCompanyAccount 01 Ge Money Sam S Club				576.00
Account No. xxxxx5847 AMCA Collection Agency 2269 South Saw Mill River Road Building 3 Elmsford, NY 10523	J	2007 Collections				360.00
Account No. xxxxxxxxxxxxxx7131 American Express General Counsels Office 3200 Commerce Pwy Md 19-01-06 Merrimar, FL 33025	H	Opened 4/01/05 Last Active 3/01/06 CreditCard				3,917.00
Account No. xxx-xx-4548 American Medical Collection Agency 2269 Saw Mill River Rd. Bldg. 3 Elmsford, NY 10523	J	2007 Collections				180.55
Account No. xxxxx9613 Americollect 814 S 8th St Manitowoc, WI 54220	H	Opened 8/01/06 Last Active 10/01/06 Collection Froedtert Memorial Hospital				3,347.00
Sheet no. <u>1</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						8,380.55

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxx-xxxx-xxxx-2117 ARM PO Box 129 Thorofare, NJ 08086	J	2001 Collections for Orchard Bank				0.00
Account No. xxx-xx-4548 Armor Systems Corp. 1700 Kiefer Dr., Suite 1 Zion, IL 60099-5105	J	2005 Collections for Patient First				0.00
Account No. xxxx0917 Arrow Financial Services 5996 W Touhy Ave Niles, IL 60714	W	Opened 8/25/06 Last Active 12/01/07 Collection A.F.S. Assignee Of Washington				3,354.00
Account No. xxxx5171 Arrow Financial Services 5996 W Touhy Ave Niles, IL 60714	H	Opened 11/29/06 Last Active 7/01/07 Collection A.F.S. Assignee Of Hsbc Card S				1,032.00
Account No. xxxx-xxxx-xxxx-7007 Arrow Financial Services 21031 Network Place Chicago, IL 60678	J	2001 Collections for Cach/Household				1,227.49
Sheet no. <u>2</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 5,613.49

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxSCx0036 Arthur B Adler & Associates, Ltd 25 E Washington St Suite 500 Chicago, IL 60602	J	2007 Notice Only Attorney for Washington Mutual				0.00
Account No. xxx-xx-4548 Asset Acceptance PO Box 2036 Warren, MI 48090	J	2000 Collections for Citibank				9,028.03
Account No. xxx-xx-4548 Assoc. IN G.I & Liver Disease, LLC. 800 N. Westmoreland Rd. Suite 102 Lake Forest, IL 60045	J	2005 Medical				126.50
Account No. xxxxx5847 Assurant Health 501 W. Michigan PO Box 324 Milwaukee, WI 53201	J	2004 Medical				73.49
Account No. xxxxx4548 ATG Credit, LLC P.O. Box 14895 Chicago, IL 60614	J	2008 medical				177.57
Sheet no. <u>3</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 9,405.59

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx-xx-4548 Best Practices Inpatient Care, Ltd. PO Box 268 Lake Zurich, IL 60047	J	2005-present Medical				99.89
Account No. xxxx-xxxx-xxxx-8942 Blatt, Hassenmiller, Leibsker & Moore LLC 125 South Wacker Dr, Suite 400 Chicago, IL 60606	J	2006 Collections for Washinton Mutual/Arrow				3,394.65
Account No. xxSC4701 Blitt and Gaines, P.C. 318 W. Adams Street Suite 1600 Chicago, IL 60606	J	2008 Judgement for Capital One				0.00
Account No. xxxxx4548 BNA Financial Bureau PO Box 899 Smyrna, TN 37167	J	2008 collection				6,879.96
Account No. xxxxxxxxxxxxxx1359 Cach Llc 370 17th St Ste 5000 Denver, CO 80202	H	Opened 6/01/06 Last Active 11/01/07 Collection Providian Bank				2,073.00
Sheet no. <u>4</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 12,447.50

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxx2547 Capital 1 Bank Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091	J	Opened 12/16/94 Last Active 4/13/06 CreditCard				7,939.00
Account No. xxxxxxxxxxxx6905 Capital 1 Bank Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091	W	Opened 8/28/04 Last Active 10/04/05 NoteLoan				5,577.00
Account No. xxxxxxxx4808 Capital 1 Bank Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091	W	Opened 9/14/02 Last Active 3/02/06 CreditCard				3,969.00
Account No. xxxxxxxx6948 Capital 1 Bank Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091	H	Opened 10/23/01 Last Active 3/02/06 CreditCard				1,439.00
Account No. xxxxxxxx8248 Capital 1 Bank Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091	H	Opened 11/01/03 Last Active 3/01/06 CreditCard				1,163.00
Sheet no. <u>5</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 20,087.00

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx4548 CBCS PO Box 69 Columbus, OH 43216	J	2008 medical				177.22
Account No. xxx-xx-4548 Certified Services PO Box 177 Waukegan, IL 60079	J	2005 Collections for Lake Co. Center for Chest Disease				0.00
Account No. Qxx2227 Certified Services Inc 1733 Washington St Ste 2 Waukegan, IL 60085	H	Opened 3/14/06 Last Active 5/01/06 Collection Thomas And Thomas Medical Ltd				121.00
Account No. Qxx2570 Certified Services Inc 1733 Washington St Ste 2 Waukegan, IL 60085	H	Opened 3/15/06 Collection Medclaims Stat/Anil Khurana				23.00
Account No. xxx-xx-4548 Chhabria Neurological Services 2645 W. Washington St. Suite 320 Waukegan, IL 60085	J	2004 Medical				255.02
Sheet no. <u>6</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						576.24

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxx1556 Citifinancia P.o. B 499 Hanover, MD 21076	J	Opened 12/01/05 Last Active 7/01/06 Unsecured				10,625.00
Account No. xxxxxxxxxxxx5296 Citifinancial Po Box 499 Hanover, MD 21076	J	Opened 12/22/05 Last Active 3/29/07 Unsecured				8,491.00
Account No. 3016 Argonne Dr. Codilis & Associates PC 15W030 N Frontage Rd Suite 100 Willowbrook, IL 60527	J	2008 Notice Only Attorney for HFC				0.00
Account No. xxxxx4548 Condell Medical Center 755 S Milwaukee on Condell Dr. Ste 127 Lake Villa, IL 60046	J	2008 medical				45,262.33
Account No. xxxxx4548 Condell Medical Center c/o Computer Credit, Inc. 640 West Fourth Street, PO Box 5238 Winston Salem, NC 27113	J	2008 medical				607.09
Sheet no. <u>7</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 64,985.42

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx4548 Condell medical Center c/o Harris & harris, LTD 600 W Jackson, Ste 400 Chicago, IL 60661	J	2008 medical				992.00
Account No. xxx-xx-4548 Consolidated Pathology Consultants 75 Remittance Dr Suite 1895 Chicago, IL 60675	J	2005 Medical				10.38
Account No. xxxxx5847 Credit Collection Services Two Wells Ave. Newton Center, MA 02459	J	2004 Collections				183.00
Account No. xxxxx4548 Credit Control PO Box 4635 Chesterfield, MO 63006	J	2008 collection				586.69
Account No. xxxxx4548 Credit Control PO Box 4635 Chesterfield, MO 63006	J	2008 collection				5,665.19
Sheet no. <u>8</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 7,437.26

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx-xx-4548 Credit Management Services PO Box 931 Brookfield, WI 53008	J	2005 Collections				151.19
Account No. xxxxx4548 Dependon Collection Service, Inc. PO Box 4833 Oak Brook 60523	J	2008 collection				2,605.11
Account No. xxx-xx-4548 Dianon Systems 200 Washington Blvd. Stratford, CT 06615	J	2006 Collections				18.55
Account No. xxxxx5847 DJORTH PO Box 515471 Los Angeles, CA 90051	J	2003 Medical				95.00
Account No. xxxxx4548 Donald Steinmuller MD SC 6 Phillip Rd., Ste. 1104 Vernon Hills, IL 60061	J	2008 medical				98.57
Sheet no. <u>9</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						2,968.42

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B I T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx-xx-4548 Drs. Berman, Morgan, Siddiqui Brontine 9669 N. Kenton #404 Skokie, IL 60076	J	2008 Medical				380.00
Account No. xxx-xx-4548 Durham & Durham, LLP 5665 New Northside Dr. Suite 340 Atlanta, GA 30328	J	2008 Collections for Midway Physicians				0.00
Account No. xxxx-xxxx-xxxx-9742 Exxonmobil - GE Moneybank PO Box 530962 Atlanta, GA 30353	J	2002 Charge account				378.19
Account No. xxx-xx-4548 Federated Adjustment Co., Inc. PO Box 170680 Milwaukee, WI 53217	J	2006 Collections				222.07
Account No. xxx8143 First Revenue Assurance PO Box 5818 Denver, CO 80217	J	2002 Collections for Exxonmobile				0.00
Sheet no. <u>10</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 980.26

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxSCx2508 Freedman Anselmo Lindberg & Rappe 1807 W Diehl PO Box 3107 Naperville, IL 60566	J	2007 Notice Only Attorney for Capital One				0.00
Account No. xxx-xx-4548 Furman & Scheer Surgical Assoc. 20 Tower Ct. St. A Gurnee, IL 60031	J	2005 Medical				58.00
Account No. xxx-xx-4548 Geeta M. Reddy, MD FACC PO Box 1127 Libertyville, IL 60048	J	2005 Medical				9.12
Account No. xxxxxxxx0800 Great Lakes Cr Un 2525 Green Bay Rd North Chicago, IL 60064	J	Opened 6/01/05 Last Active 1/17/07 Repossession				7,794.00
Account No. xxx-xx-4548 Gurnee Radiology Center 25 Tower Ct. Ste. A Gurnee, IL 60031	J	2005 Medical				3.66
Sheet no. <u>11</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 7,864.78

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxx0040	J	Opened 9/07/05 Last Active 1/07/06 CheckCreditOrLineOfCredit				14,977.00
Hfc - Usa/Beneficial Attn: Bankruptcy 961 Weigel Dr Elmhurst, IL 60126						
Account No. xxx-xx-4548	J	2007-2008 Collections for IL Bone and Joint				0.00
HIS Healthcare Info. Services 5057 Paysphere Circle Chicago, IL 60674						
Account No. xxxxxxxxx2372	J	Opened 9/25/03 Last Active 9/09/05 foreclosure of real estate located at 1014 Cummings, Waukegon, IL. Foreclosure was 3 years ago				Unknown
Home Equity Servicing Corporation Attn: Bankruptcy Department 1100 Corporate Center Raleigh, NC 27607						
Account No. xxx-xx-4548	J	2005 Collections for NE Radiology				0.00
ICS PO Box 646 Oak Lawn, IL 60454						
Account No. xxx-xx-4548	J	2005 Medical				640.53
IHC PO Box 3261 Milwaukee, WI 53201						
Sheet no. <u>12</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						15,617.53

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B I T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx-xx-4548 IL Bone and Joint Institute 5057 Paysphere Circle Chicago, IL 60647	J	2007-2008 Medical				937.13
Account No. xxx-xx-xxxx and xxx-xx-5847 Il. Physical Medicine Rehab. and Electrodiagnostics Center PO Box 1215 Slater, IA 50244	J	1993 Medical				3,400.00
Account No. xxxxx5847 JW Hutton, Inc. 706 W. Main St. Slater, IA 50244	J	2005 Medical				73.19
Account No. x5492 Keynote Consulting 220 W Campus Dr Ste 102 Arlington Heights, IL 60004	H	Opened 2/14/06 Last Active 3/01/06 Collection Lake Shore Gastro				338.00
Account No. x2420 Keynote Consulting 220 W Campus Dr Ste 102 Arlington Heights, IL 60004	H	Opened 9/18/06 Last Active 10/01/06 Collection Lake Shore Gastro				119.00
Sheet no. <u>13</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						4,867.32

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx5847 Lab Corp. of America PO Box 2240 Burlington, NC 27216	J	2004 Medical				360.00
Account No. xxx-xx-4548 Lake Co. Center for Chest Disease 15 Tower Ct. Suite 140 Gurnee, IL 60031	J	2005 Medical				31.61
Account No. xxx-xx-4548 Lake Co. Radiology Assoc., SC 36104 Treasury Ctr. Chicago, IL 60694	J	2005 Medical				506.81
Account No. xxxxx4548 Lake County General & Vascular Surg 1425 N Hunt Club Rd., Ste 103 Gurnee, IL 60031	J	2008 medical				39.86
Account No. xxxxx4548 Lake Forest ER 75 Remittance Dr Suite 1951 Chicago, IL 60675	J	2008 medical				232.90
Sheet no. <u>14</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,171.18

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx4548 Lake Forest Hospital 660 N. Westmoreland Rd Lake Forest, IL 60045	J	2008 medical bill				3,088.46
Account No. xxx-xx-4548 Lake Forest Hospital 660 N. Westmoreland Rd Lake Forest, IL 60045	J	2005 medical				255.02
Account No. xxxxx5847 LCA collections PO Box 2240 Burlington, NC 27216	J	2005-2006 Collections				177.00
Account No. xxx-xx-4548 Lindenhurst Radiology PO Box 1547 Sedalia, MO 65302	J	2005 Medical				16.44
Account No. xxx-xx-4548 Loyola University Medical Center 2160 S First Ave Maywood, IL 60153	J	9/2005-2/2006 medical bill				Unknown
Sheet no. <u>15</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						3,536.92

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx4548 Mahesh K Agarwal MD 200 S Greenleaf Ste G Gurnee, IL 60031	J	2008 medical				191.37
Account No. xxxxx4548 Malcolm S. Geraild & Assoc 332 S. Michigan Ave Ste 600 Chicago, IL 60604	J	2007 medical				1,947.77
Account No. xxxxx4548 Malcom S. Gerald & Associates, Inc 332 S Michigan Ave Suite 600 Chicago, IL 60604	J	2008 medical				116.22
Account No. Oxx491AV2 Med Busi Bur 1460 Renaissance D Suite 400 Park Ridge, IL 60068	H	Opened 5/01/06 Last Active 11/01/07 Anes Assoc Of Vista Hlt				121.00
Account No. xxxxxx2417 Medicalcol 6862 T R Greenwood, IN 46143	H	Opened 10/01/06 Last Active 12/01/07 Med1 02 Metro Center For Health				67.00
Sheet no. <u>16</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 2,443.36

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx1707 Mhfs Med Health Financial Service Po Box 1996 Milwaukee, WI 53201	H	Opened 7/12/06 Collection Medical College Physicians				528.00
Account No. xxx4097 Mhfs Med Health Financial Service Po Box 1996 Milwaukee, WI 53201	H	Opened 9/06/07 Last Active 11/01/07 Collection Medical College Physicians				52.00
Account No. xxxxx5847 Midland Credit Management Dept. 12421 PO Box 603 Oaks, PA 19456	J	2001 Collections for GE/Sams				581.35
Account No. xxxxx4548, xxxxx5847 Midland Credit Management Dept. 12421 PO Box 603 Oaks, PA 19456	J	2000 Collections for Household				0.00
Account No. xxx-xx-4548 Midway Emergency Physicians 5665 New Northside Dr. Suite 320 Atlanta, GA 30328	J	2008 Medical				48.22
Sheet no. <u>17</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,209.57

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx-xx-4548 Midwestern Regional Medical Cnt. 2610 Sheridan Rd 2nd Floor Zion, IL 60099	J	2008 Medical				41.70
Account No. xxx-xx-4548 Murphy Ambulance POBox 6990 Libertyville, IL 60048	J	2005 Medical				85.90
Account No. xxxxxx2566 Nationwide Credit & Co 9919 W Roosevelt Rd Westchester, IL 60154	H	Opened 3/06/06 Collection Loyola Univ Phys Foundation				297.00
Account No. xxxxxx2565 Nationwide Credit & Co 9919 W Roosevelt Rd Westchester, IL 60154	H	Opened 3/06/06 Collection Loyola Univ Phys Foundation				268.00
Account No. xxxxxx1419 Nationwide Credit & Co 9919 W Roosevelt Rd Westchester, IL 60154	H	Opened 8/06/06 Collection Loyola University Health Sys.				193.00
Sheet no. <u>18</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						885.60

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C					DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.
Account No. xxxxxxx2560	H	Opened 3/06/06 Collection Loyola Univ Phys Foundation				89.00	
Nationwide Credit & Co 9919 W Roosevelt Rd Westchester, IL 60154							
Account No. xxxxxxx2555	H	Opened 3/06/06 Collection Loyola Univ Phys Foundation				89.00	
Nationwide Credit & Co 9919 W Roosevelt Rd Westchester, IL 60154							
Account No. xxxxxxx2575	H	Opened 3/06/06 Collection Loyola Univ Phys Foundation				88.00	
Nationwide Credit & Co 9919 W Roosevelt Rd Westchester, IL 60154							
Account No. xxxxxxx2564	H	Opened 3/06/06 Last Active 8/19/07 Collection Loyola Univ Phys Foundation				0.00	
Nationwide Credit & Co 9919 W Roosevelt Rd Westchester, IL 60154							
Account No. xxx-xx-4548	J	2005-2007 Collections				39.09	
NCO Financial PO Box 497 Waukegan, IL 60079							
Sheet no. <u>19</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	305.09

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx4850 Nco Financial Systems 507 Prudential Rd Horsham, PA 19044	H	Opened 2/04/07 Last Active 9/01/07 Collection Progressive Ins Co				397.00
Account No. xxx-xx-4548 NE Radiology Assoc., SC PO Box 3837 Springfield, IL 62708	J	2005 Medical				176.56
Account No. xxxxx4548 New ERA Medical Services PO Box 915 Bedford Park, IL 60499	J	2008 medical				273.13
Account No. xxxxx4548 North Chicago Fire Dept PO Box 1368 Elmhurst, IL 60126	J	2007 consumer debt				2,703.89
Account No. xxx-xx-4548 North Shore Cardiologists 2151 Waukegan Ste. 100 Deerfield, IL 60015	J	2007-2008 Medical				101.02
Sheet no. <u>20</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						3,651.60

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxx-xx3671 North Shore Sanitary Dist. PO Box 2140 Bedford Park, IL 60499	J	2007 Sanitation				154.39
Account No. xxxx-xxxx-xxxx-1995 Northland Group PO Box 390905 Edina, MN 55439	J	1994 Collections for Capital One				0.00
Account No. xx2251 Oac Po Box 371100 Milwaukee, WI 53237	H	Opened 4/01/06 Last Active 12/01/07 Med1 02 Lake County Radiology Assoc				101.00
Account No. xxx-xx-4548 OAC PO Box 371100 Milwaukee, WI 53237	J	2005 Collections				401.78
Account No. xxx-xx-4548 Oncology-Hematology Assoc. of N. IL 202 S. Greenleaf Suite E Gurnee, IL 60031	J	2006 Medical				88.16
Sheet no. <u>21</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						745.33

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxx-xxxx-xxxx-2117 Orchard Bank - HSBC PO Box 80084 Salinas, CA 93912	J	1999-2000 Credit Card				826.46
Account No. xxxxxxxxxx3379 OSI PO Box 946 Brookfield, WI 53008	J	2004 Collections for Home Depot				1,957.89
Account No. xxx-xx-4548 Patient First, S.C. 2610 Sheridan Road Zion, IL 60099	J	2005 Medical				12.99
Account No. xxxxx4548 Pellettieri & Associates, LTD 991 Oak Creek Drive Lombard, IL 60148	J	2008 medical				81.77
Account No. xxxxxxxxxx3376 People First Recoveries Dept. 10801 PO Box 1259 Oaks, PA 19456	J	2004 Collections for OSI/Home Depot				0.00
Sheet no. <u>22</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 2,879.11

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx4548 Pinnacle Health Care 2222 W 14th St. Waukegan, IL 60085	J	2008 medical				1,140.00
Account No. xxxxxxxxxxxx2117 Portfolio Recoveries Po Box 12914 Norfolk, VA 23541	H	Opened 4/20/07 Last Active 11/01/07 FactoringCompanyAccount Hsbc				814.00
Account No. xxxxx5847 Praxis Financial Solutions 7301 N. Lincoln Ave. Suite 110 Lincolnwood, IL 60712	J	2001 Collections for GE/Sams				0.00
Account No. xxxxxxxxxxxx6027 Pro Consulting Services PO Box 66768 Houston, TX 77266	J	2005 Collections				4,318.06
Account No. xxxxx4548 Professional Account Services Inc. POBox 188 Brentwood, TN 37024	J	2008 collection				536.72
Sheet no. <u>23</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 6,808.78

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx5847 Professional Account Services, Inc. PO Box 188 Brentwood, TN 37024	J	2008 collection				508.20
Account No. xxxxx4548 Provena St. Therese Medical Center 99 Greenwood Waukegan, IL 60087	J	2005 medical				81.77
Account No. xxxxx4548 Provena St. Therese Medical Center 99 Greenwood Waukegan, IL 60087	J	2004 medical				1,138.70
Account No. xxxxx4548 Pulmonary Physicians of the North 2151 Waukegoan Rd., Ste 110 Deerfield, IL 60015	J	2008 medical				177.57
Account No. xxx-xx-4548 Revenue Production Management PO Box 77304 Detroit, MI 48277	J	2007-2008 Collections for Rush North Shore Medical				0.00
Sheet no. <u>24</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,906.24

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx-xx-4548 Rush North Shore Medical Center PO Box 4233 Carol Stream, IL 60197	J	2007-2008 Medical				1,598.24
Account No. xxxxxxxxxxxx3261 Sams Club Ge Consumer Finance Po Box 103104 Roswell, GA 30076	W	Opened 8/13/02 Last Active 3/06/06 ChargeAccount				0.00
Account No. Dxxxx688N1 Senex Services Corp 3500 Depauw Blvd Ste 3050 Indianapolis, IN 46268	H	Opened 2/16/06 Last Active 1/01/07 Collection Best Practices Inpatient Care				152.00
Account No. xxx-xx-4548 Sko Brenner American, Inc PO Box 230 Farmingdale, NY 11735	J	2005-2006 Collections				180.55
Account No. xxx-xx-4548 State Collection Service 2509 S. Stoughton Rd. Madison, WI 53716	J	2005 Collections				69.10
Sheet no. <u>25</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,999.89

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx-xx-4548S Superior Ambulance PO Box 1407 Elmhurst, IL 60126	J	2005-2007 Medical				380.86
Account No. xxxxx3914 Target Po Box 1327 Mail Stop 3CK Minneapolis, MN 55440	W	Opened 12/12/02 Last Active 3/04/06 ChargeAccount				632.00
Account No. xxx-xx-4548 Transworld Collection Agency 25 NW Point Blvd. #750 Elk Grove Village, IL 60007	J	2005 Collections				151.19
Account No. xxx-xx-4548 United Recovery Service, LLC 18525 Torrence Ave Suite C-6 Lansing, IL 60438	J	2005-2007 Collections				91.18
Account No. xxx-xx-4548 University Anesthesiologists, SC PO Box 128 Glenview, IL 60025	J	2008 Medical				73.54
Sheet no. <u>26</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,328.77

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx-xx-4548 Urology Specialists of Lake Co. 202 S. Greenleaf Ste. D Gurnee, IL 60031	J	2006-2007 Medical				302.38
Account No. xxxxx4548 Victory Memorial PO Box 933 Bedford Park, IL 60499	J	1993-2005 medical				1,138.70
Account No. xxxxx4548 Victory Memorial PO Box 933 Bedford Park, IL 60499	J	1993-2005 medical				493.59
Account No. xxxxx4548 Victory Memorial Hospital 1324 N Sheridan Rd. Waukegan, IL 60085	J	1993-2005 medical				47,338.72
Account No. xxx-xx-4548 Vista Imaging Assoc PO Box 6980 Libertyville, IL 60048-6980	J	2005-2007 Medical				2,118.28
Sheet no. <u>27</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						51,391.67

B6F (Official Form 6F) (12/07) - Cont.

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx.xx.5847 Vista Imaging Assoc PO Box 6980 Libertyville, IL 60048-6980	J	2005-2008 Medical				178.00
Account No. xxxxx4548 Vista Medical Center East 99 Greenwood Ave Waukegan, IL 60087	J	2005-2007 medical				35,243.22
Account No. xxxxx5847 Vista Medical Center West 99 Greenwood Ave. Waukegan, IL 60087	J	2008 medical bill judgment				633.20
Account No. 						
Account No. 						
Sheet no. <u>28</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 36,054.42
(Report on Summary of Schedules)						Total 279,040.49

B6G (Official Form 6G) (12/07)

In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
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In re Paul J Ohm,
Frances C Ohm

Case No. _____

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Dirk M. Ohm 1616 Lincoln Street North Chicago, IL 60064 Joint Debtor's son	Norstate Bank 1601 North Lewis Ave. Waukegan, IL 60085 Real estate located at 1019 Pine, Waukegon, IL. Joint Debtor is not on deed, only a cosigner on the mortgage

B6I (Official Form 6I) (12/07)

In re Paul J Ohm
Frances C Ohm

Case No. _____

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): None.	AGE(S):
Employment:	DEBTOR	SPOUSE
Occupation	Unemployed	Owner
Name of Employer	Unemployed	Ohm Electric & Construction
How long employed		20 years
Address of Employer		3016 Argonne Dr North Chicago, IL 60064

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$ 0.00	\$ 2,868.00
2. Estimate monthly overtime	\$ 0.00	\$ 0.00

3. SUBTOTAL

\$ 0.00	\$ 2,868.00
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4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

\$ 0.00	\$ 0.00
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b. Insurance

\$ 0.00	\$ 0.00
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c. Union dues

\$ 0.00	\$ 0.00
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d. Other (Specify): Business Operating Expenses

\$ 0.00	\$ 1,190.00
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Business Purchases

\$ 0.00	\$ 1,368.00
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5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ 0.00	\$ 2,558.00
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6. TOTAL NET MONTHLY TAKE HOME PAY

\$ 0.00	\$ 310.00
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7. Regular income from operation of business or profession or farm (Attach detailed statement)

\$ 0.00	\$ 0.00
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8. Income from real property

\$ 0.00	\$ 0.00
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9. Interest and dividends

\$ 0.00	\$ 0.00
---------	---------

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

\$ 0.00	\$ 0.00
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11. Social security or government assistance

(Specify): Social Security

\$ 784.00	\$ 0.00
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\$ 0.00	\$ 0.00
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12. Pension or retirement income

\$ 0.00	\$ 0.00
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13. Other monthly income

(Specify): Worker's Compensation Income

\$ 0.00	\$ 459.00
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\$ 0.00	\$ 0.00
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14. SUBTOTAL OF LINES 7 THROUGH 13

\$ 784.00	\$ 459.00
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15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

\$ 784.00	\$ 769.00
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16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

\$ 1,553.00	
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(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Joint Debtor just began receiving Worker's Compensation checks in the month of January, 2009. She gets approximately \$106/week

B6J (Official Form 6J) (12/07)

In re Paul J Ohm
Frances C Ohm Debtor(s) Case No. _____

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	400.00
a. Are real estate taxes included? Yes _____ No <u>X</u>		
b. Is property insurance included? Yes _____ No <u>X</u>		
2. Utilities:		
a. Electricity and heating fuel	\$	0.00
b. Water and sewer	\$	0.00
c. Telephone	\$	0.00
d. Other <u>Cell</u>	\$	120.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	350.00
5. Clothing	\$	0.00
6. Laundry and dry cleaning	\$	0.00
7. Medical and dental expenses	\$	150.00
8. Transportation (not including car payments)	\$	260.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	50.00
c. Health	\$	0.00
d. Auto	\$	0.00
e. Other _____	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) _____	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	220.00
b. Other _____	\$	0.00
c. Other _____	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other _____	\$	0.00
Other _____	\$	0.00

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ 1,550.00

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	1,553.00
b. Average monthly expenses from Line 18 above	\$	1,550.00
c. Monthly net income (a. minus b.)	\$	3.00

United States Bankruptcy Court
Northern District of Illinois

In re Paul J Ohm
Frances C Ohm

Debtor(s)

Case No. _____
Chapter 7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 43 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date January 29, 2009

Signature /s/ Paul J Ohm
Paul J Ohm
Debtor

Date January 29, 2009

Signature /s/ Frances C Ohm
Frances C Ohm
Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Northern District of Illinois

In re Paul J Ohm
Frances C Ohm

Debtor(s)

Case No.
Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$45,611.82	2007 Employment Income - estimated per 2007 Tax Transcripts
\$0.00	2006 Business Income - estimated per 2006 Tax Transcripts
	Joint Debtor had a business loss and no business income
\$780.26	2008 Business Income for Joint Debtor
	Estimated based on last 6 months

2. Income other than from employment or operation of business

None ☐ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$9,450.00	2006 Social Security Income - estimated per 2006 Tax Transcripts
\$10,567.20	2008 year-to-date Social Security Income - estimated per Social Security Award Letter

3. Payments to creditors

None ☒ **Complete a. or b., as appropriate, and c.**

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Household Finance Corporation III v. Paul Ohm et al Case No. 07 CH 1409	civil	Circuit Court of Lake County, IL	notice of sale issued
Capital One Bank v. Frances Ohm Case No. 07 SC 02508	civil	Circuit Court of Lake County, IL	judgment entered
Capital One Bank v. Paul Ohm Case No. 07SC4750	civil	Circuit Court of Lake County, IL	judgment

CAPTION OF SUIT AND CASE NUMBER Washington Mutual v. Ohm Case No. 07SC10036	NATURE OF PROCEEDING civil	COURT OR AGENCY AND LOCATION Circuit Court of Lake County, IL	STATUS OR DISPOSITION judgment
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None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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5. Repossessions, foreclosures and returns

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER HFC 961 Weigel Dr Elmhurst, IL 60126	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN 4/2008	DESCRIPTION AND VALUE OF PROPERTY Foreclosure 3016 Argonne Dr. North Chicago, IL 60064
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6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Legal Helpers 233 S. Wacker Dr. Suite 5150 Chicago, IL 60606	2008	\$1645 paid pre-petition toward total attorney fee of \$1007, filing fee of \$299, and document acquisition and credit counseling/debtor education facilitation fee of \$136 and reimbursable expense of \$203

10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
3016 Argonne Dr. North Chicago, IL 60064	same	3/2002-12/2008

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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18 . Nature, location and name of business

None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Ohm Electric & Construction	5847	PO Box 306 North Chicago, IL 60064	Sole Proprietorship	1/1985-present

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

- None ☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS
Paul Ohm
1616 Lincoln Street
North Chicago, IL 60064

DATES SERVICES RENDERED
1/1985-present

- None ☒ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
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- None ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME	ADDRESS
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- None ☒ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS	DATE ISSUED
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20. Inventories

- None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
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- None ☒ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
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21 . Current Partners, Officers, Directors and Shareholders

- None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
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- None ☒ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
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22 . Former partners, officers, directors and shareholders

- None ☒ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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23 . Withdrawals from a partnership or distributions by a corporation

None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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24. Tax Consolidation Group.

None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
----------------------------	--------------------------------------

25. Pension Funds.

None ☐ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER (EIN)
----------------------	--------------------------------------

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date <u>January 29, 2009</u>	Signature <u>/s/ Paul J Ohm</u> Paul J Ohm Debtor
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Date <u>January 29, 2009</u>	Signature <u>/s/ Frances C Ohm</u> Frances C Ohm Joint Debtor
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Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

United States Bankruptcy Court
Northern District of Illinois

In re Paul J Ohm
Frances C Ohm

Debtor(s)

Case No. _____
Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: American General Finan	Describe Property Securing Debt: 1988 Chevrolet P30, 125,000 miles Value Based on Kelley Blue Book
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt	

B8 (Form 8) (12/08)

Page 2

Property No. 2	
Creditor's Name: Norstates Bank	Describe Property Securing Debt: Real Estate located at 1019 Pine, Waukegon, IL Joint Debtor is not on the deed of this real estate. She is a cosigner on the second mortgage.
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input checked="" type="checkbox"/> Not claimed as exempt	

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: -NONE-	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date January 29, 2009

Signature /s/ Paul J Ohm
Paul J Ohm
Debtor

Date January 29, 2009

Signature /s/ Frances C Ohm
Frances C Ohm
Joint Debtor

United States Bankruptcy Court
Northern District of Illinois

In re Paul J Ohm
Frances C Ohm

Debtor(s)

Case No.

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<u>1,007.00</u>
Prior to the filing of this statement I have received.....	\$	<u>1,007.00</u>
Balance Due.....	\$	<u>0.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning as needed.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, any document retrieval services, credit counseling and financial management course fees, post-discharge credit repair, judicial lien avoidances, preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods, relief from stay actions, motions to redeem or any other adversary proceeding, or preparation and filing of reaffirmation agreements and applications.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: January 29, 2009

/s/ Michelle Hinds

Michelle Hinds 6295092

Legal Helpers, PC

Sears Tower

233 S. Wacker Suite 5150

Chicago, IL 60606

(312) 467-0004 Fax: (312) 467-1832

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

<u>Michelle Hinds 6295092</u>	X <u>/s/ Michelle Hinds</u>	<u>January 29, 2009</u>
Printed Name of Attorney	Signature of Attorney	Date
Address:		
Sears Tower		
233 S. Wacker Suite 5150		
Chicago, IL 60606		
(312) 467-0004		

Certificate of Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

<u>Paul J Ohm</u>	X <u>/s/ Paul J Ohm</u>	<u>January 29, 2009</u>
<u>Frances C Ohm</u>	Signature of Debtor	Date
Printed Name(s) of Debtor(s)		
Case No. (if known) _____	X <u>/s/ Frances C Ohm</u>	<u>January 29, 2009</u>
	Signature of Joint Debtor (if any)	Date

**United States Bankruptcy Court
Northern District of Illinois**

In re Paul J Ohm
Frances C Ohm Debtor(s) Case No. _____
Chapter 7

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: 123

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: January 29, 2009 /s/ Paul J Ohm
Paul J Ohm
Signature of Debtor

Date: January 29, 2009 /s/ Frances C Ohm
Frances C Ohm
Signature of Debtor

A/r Concepts
2320 Dean St Suite 202
Saint Charles, IL 60175

A/R Resources
PO Box 10336
Jacksonville, FL 32247

A/R Resources, Inc.
PO Box 10336
Jacksonville, FL 32247

Ais Services
50 California St Suite 1500
San Francisco, CA 94111

AMCA Collection Agency
2269 South Saw Mill River Road
Building 3
Elmsford, NY 10523

American Express
General Counsels Office
3200 Commerce Pwy Md 19-01-06
Merrimar, FL 33025

American General Finan
5739 75th St
Kenosha, WI 53142

American Medical Collection Agency
2269 Saw Mill River Rd.
Bldg. 3
Elmsford, NY 10523

Americollect
814 S 8th St
Manitowoc, WI 54220

ARM
PO Box 129
Thorofare, NJ 08086

Armor Systems Corp.
1700 Kiefer Dr., Suite 1
Zion, IL 60099-5105

Arrow Financial Services
5996 W Touhy Ave
Niles, IL 60714

Arrow Financial Services
21031 Network Place
Chicago, IL 60678

Arthur B Adler & Associates, Ltd
25 E Washington St
Suite 500
Chicago, IL 60602

Asset Acceptance
PO Box 2036
Warren, MI 48090

Assoc. IN G.I & Liver Disease, LLC.
800 N. Westmoreland Rd.
Suite 102
Lake Forest, IL 60045

Assurant Health
501 W. Michigan
PO Box 324
Milwaukee, WI 53201

ATG Credit, LLC
P.O. Box 14895
Chicago, IL 60614

Best Practices Inpatient Care, Ltd.
PO Box 268
Lake Zurich, IL 60047

Blatt, Hassenmiller, Leibsker
& Moore LLC
125 South Wacker Dr, Suite 400
Chicago, IL 60606

Blitt and Gaines, P.C.
318 W. Adams Street
Suite 1600
Chicago, IL 60606

BNA Financial Bureau
PO Box 899
Smyrna, TN 37167

Cach Llc
370 17th St Ste 5000
Denver, CO 80202

Capital 1 Bank
Attn: C/O TSYS Debt Management
Po Box 5155
Norcross, GA 30091

CBCS
PO Box 69
Columbus, OH 43216

Certified Services
PO Box 177
Waukegan, IL 60079

Certified Services Inc
1733 Washington St Ste 2
Waukegan, IL 60085

Chhabria Neurological Services
2645 W. Washington St.
Suite 320
Waukegan, IL 60085

Citifinancia
P.o. B 499
Hanover, MD 21076

Citifinancial
Po Box 499
Hanover, MD 21076

Codilis & Associates PC
15W030 N Frontage Rd
Suite 100
Willowbrook, IL 60527

Condell Medical Center
755 S Milwaukee on Condell Dr.
Ste 127
Lake Villa, IL 60046

Condell Medical Center
c/o Computer Credit, Inc.
640 West Fourth Street, PO Box 5238
Winston Salem, NC 27113

Condell medical Center
c/o Harris & harris, LTD
600 W Jackson, Ste 400
Chicago, IL 60661

Consolidated Pathology Consultants
75 Remittance Dr
Suite 1895
Chicago, IL 60675

Credit Collection Services
Two Wells Ave.
Newton Center, MA 02459

Credit Control
PO Box 4635
Chesterfield, MO 63006

Credit Management Services
PO Box 931
Brookfield, WI 53008

Dependon Collection Service, Inc.
PO Box 4833
Oak Brook 60523

Dianon Systems
200 Washington Blvd.
Stratford, CT 06615

Dirk M. Ohm
1616 Lincoln Street
North Chicago, IL 60064

DJORTHO
PO Box 515471
Los Angeles, CA 90051

Donald Steinmuller MD SC
6 Phillip Rd., Ste. 1104
Vernon Hills, IL 60061

Drs. Berman, Morgan, Siddiqui
Brontine
9669 N. Kenton #404
Skokie, IL 60076

Durham & Durham, LLP
5665 New Northside Dr.
Suite 340
Atlanta, GA 30328

Exxonmobil - GE Moneybank
PO Box 530962
Atlanta, GA 30353

Federated Adjustment Co., Inc.
PO Box 170680
Milwaukee, WI 53217

First Revenue Assurance
PO Box 5818
Denver, CO 80217

Freedman Anselmo Lindberg & Rappe
1807 W Diehl
PO Box 3107
Naperville, IL 60566

Furman & Scheer Surgical Assoc.
20 Tower Ct.
St. A
Gurnee, IL 60031

Geeta M. Reddy, MD FACC
PO Box 1127
Libertyville, IL 60048

Great Lakes Cr Un
2525 Green Bay Rd
North Chicago, IL 60064

Gurnee Radiology Center
25 Tower Ct. Ste. A
Gurnee, IL 60031

Hfc - Usa/Beneficial
Attn: Bankruptcy
961 Weigel Dr
Elmhurst, IL 60126

HIS Healthcare Info. Services
5057 Paysphere Circle
Chicago, IL 60674

Home Equity Servicing Corporation
Attn: Bankruptcy Department
1100 Corporate Center
Raleigh, NC 27607

ICS
PO Box 646
Oak Lawn, IL 60454

IHC
PO Box 3261
Milwaukee, WI 53201

IL Bone and Joint Institute
5057 Paysphere Circle
Chicago, IL 60647

Il. Physical Medicine Rehab.
and Electrodiagnostics Center
PO Box 1215
Slater, IA 50244

JW Hutton, Inc.
706 W. Main St.
Slater, IA 50244

Keynote Consulting
220 W Campus Dr Ste 102
Arlington Heights, IL 60004

Lab Corp. of America
PO Box 2240
Burlington, NC 27216

Lake Co. Center for Chest Disease
15 Tower Ct.
Suite 140
Gurnee, IL 60031

Lake Co. Radiology Assoc., SC
36104 Treasury Ctr.
Chicago, IL 60694

Lake County General & Vascular Surg
1425 N Hunt Club Rd., Ste 103
Gurnee, IL 60031

Lake Forest ER
75 Remittance Dr
Suite 1951
Chicago, IL 60675

Lake Forest Hospital
660 N. Westmoreland Rd
Lake Forest, IL 60045

LCA collections
PO Box 2240
Burlington, NC 27216

Lindenhurst Radiology
PO Box 1547
Sedalia, MO 65302

Loyola University Medical Center
2160 S First Ave
Maywood, IL 60153

Mahesh K Agarwal MD
200 S Greenleaf Ste G
Gurnee, IL 60031

Malcolm S. Geraild & Assoc
332 S. Michigan Ave
Ste 600
Chicago, IL 60604

Malcom S. Gerald & Associates, Inc
332 S Michigan Ave
Suite 600
Chicago, IL 60604

Med Busi Bur
1460 Renaissance D Suite 400
Park Ridge, IL 60068

Medicalcol
6862 T R
Greenwood, IN 46143

Mhfs
Med Health Financial Service
Po Box 1996
Milwaukee, WI 53201

Midland Credit Management
Dept. 12421
PO Box 603
Oaks, PA 19456

Midway Emergency Physicians
5665 New Northside Dr.
Suite 320
Atlanta, GA 30328

Midwestern Regional Medical Cnt.
2610 Sheridan Rd
2nd Floor
Zion, IL 60099

Murphy Ambulance
POBox 6990
Libertyville, IL 60048

Nationwide Credit & Co
9919 W Roosevelt Rd
Westchester, IL 60154

NCO Financial
PO Box 497
Waukegan, IL 60079

Nco Financial Systems
507 Prudential Rd
Horsham, PA 19044

NE Radiology Assoc., SC
PO Box 3837
Springfield, IL 62708

New ERA Medical Services
PO Box 915
Bedford Park, IL 60499

Norstates Bank
1601 N Lewis Ave
Waukegan, IL 60085

North Chicago Fire Dept
PO Box 1368
Elmhurst, IL 60126

North Shore Cardiologists
2151 Waukegan
Ste. 100
Deerfield, IL 60015

North Shore Sanitary Dist.
PO Box 2140
Bedford Park, IL 60499

Northland Group
PO Box 390905
Edina, MN 55439

Oac
Po Box 371100
Milwaukee, WI 53237

Oncology-Hematology Assoc. of N. IL
202 S. Greenleaf
Suite E
Gurnee, IL 60031

Orchard Bank - HSBC
PO Box 80084
Salinas, CA 93912

OSI
PO Box 946
Brookfield, WI 53008

Patient First, S.C.
2610 Sheridan Road
Zion, IL 60099

Pellettieri & Associates, LTD
991 Oak Creek Drive
Lombard, IL 60148

People First Recoveries
Dept. 10801
PO Box 1259
Oaks, PA 19456

Pinnacle Health Care
2222 W 14th St.
Waukegan, IL 60085

Portfolio Recoveries
Po Box 12914
Norfolk, VA 23541

Praxis Financial Solutions
7301 N. Lincoln Ave.
Suite 110
Lincolnwood, IL 60712

Pro Consulting Services
PO Box 66768
Houston, TX 77266

Professional Account Services Inc.
POBox 188
Brentwood, TN 37024

Professional Account Services, Inc.
PO Box 188
Brentwood, TN 37024

Provena St. Therese Medical Center
99 Greenwood
Waukegan, IL 60087

Pulmonary Physicians of the North
2151 Waukegoan Rd., Ste 110
Deerfield, IL 60015

Revenue Production Management
PO Box 77304
Detroit, MI 48277

Rush North Shore Medical Center
PO Box 4233
Carol Stream, IL 60197

Sams Club
Ge Consumer Finance
Po Box 103104
Roswell, GA 30076

Senex Services Corp
3500 Depauw Blvd Ste 3050
Indianapolis, IN 46268

Sko Brenner American, Inc
PO Box 230
Farmingdale, NY 11735

State Collection Service
2509 S. Stoughton Rd.
Madison, WI 53716

Superior Ambulance
PO Box 1407
Elmhurst, IL 60126

Target
Po Box 1327
Mail Stop 3CK
Minneapolis, MN 55440

Transworld Collection Agency
25 NW Point Blvd.
#750
Elk Grove Village, IL 60007

United Recovery Service, LLC
18525 Torrence Ave
Suite C-6
Lansing, IL 60438

University Anesthesiologists, SC
PO Box 128
Glenview, IL 60025

Urology Specialists of Lake Co.
202 S. Greenleaf
Ste. D
Gurnee, IL 60031

Victory Memorial
PO Box 933
Bedford Park, IL 60499

Victory Memorial Hospital
1324 N Sheridan Rd.
Waukegan, IL 60085

Vista Imaging Assoc
PO Box 6980
Libertyville, IL 60048-6980

Vista Medical Center East
99 Greenwood Ave
Waukegan, IL 60087

Vista Medical Center West
99 Greenwood Ave.
Waukegan, IL 60087